## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the			
1.181			ree pap	Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
32074	<b>-</b>	9/2010				niccion	
INTERNATIONAL BUSINESS MACHINES CORPORATION				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United			
DEPT. 18G				I bereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USENDO ISSUE FEE address above, or being facsimile			
BLDG. 321-482			tran	smitted to the USPTO (5	71) 273-2885, on the de	te indicated below.	
2070 ROUTE 5 HOPEWELL JU	Z JNCTION, NY 125	33 PATES	ه ۱۹ 🖺	(Depositor's name)			
			° 2011 <b>8</b>			(Signature)	
APPLICATION NO. FILING DATE		ARKS CAMED ENVENTOR			(Date)		
L			FIRST NAMED INVENTOR	ATTO	DRNEY DOCKET NO.	CONFIRMATION NO.	
10/596,569	06/16/2006		Levent Gulari	F	IS920030182US1	7980	
THE OF INVENTION	n: IHREE-DIMENSION	IAL SILICON ON OXID	DE DEVICE ISOLATION				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	03/29/2011	
EXAMINER		ART UNIT	CLASS-SUBCLASS	03/29/2011	SMOHAMM1 00000025	090458 10596569	
HA, NATHAN W		2814	438-475000	01 FC:1501	1510.00 DA		
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> </ol>			2. For printing on the p		1154	1) IAVITEA	
Change of correspondence address (or Change of Correspondence			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively.  (2) the name of a single firm (having as a member a				
Address form P10/SB/122) attached.							
"Fee Address" indication (or "Fee Address PTO/SB/47; Rev 03-02 or more recent) attach Number is required.				igent) and the names of t meys or agents. If no nar	ip to		
			THE PATENT (print or ty)				
PLEASE NOTE: Un recordation as set fort	less an assignee is ident th in 37 CFR 3.11. Com	tified below, no assignee pletion of this form is NO	data will appear on the p T a substitute for filing an	ntent. If an assignee is i	dentified below, the do	cument has been filed for	
(A) NAME OF ASSI	AL BUSINE		(B) RESIDENCE: (CITY	and STATE OR COUNT			
- A A		-	ARMONK	, NY			
	CORPORATIO	• •	_				
Please check the appropr	iate assignee category or	categories (will not be pr	ninted on the patent):	Individual Corporat	ion or other private grou	up entity Government	
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
Issue Fee			A check is enclosed.				
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.				
Advance Order - :	# of Copies		The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 09-0458 (enclose an extra copy of this form).				
5. Change in Entity Sta	tus (from status indicate	d above)					
	s SMALL ENTITY state		b. Applicant is no long				
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepte ues Patent and Trademark	d from anyone other than to Office.	ne applicant; a registered	attorney or agent; or the	assignee or other party in	
Authorized Signature				Date	1-10-11		
Typed or printed name	- 110	PETROKAI	TIS	Registration No.	38, 99.	5	
an appucation. Confiden	HALIEV IS GOVERNED DV 35	U.S.C. 122 and 37 CFR	1.14. This collection is est	imated to take 17 minute	s to complete including	by the USPTO to process) gathering, preparing, and	
this form and/or suggesti Box 1450, Alexandria, V	ions for reducing this but irginia 22313-1450. DC	rden, should be sent to the	e Chief Information Office COMPLETED FORMS TO	r, U.S. Patent and Trader  THIS ADDRESS SEN	nark Office, U.S. Depar D TO: Commissioner fo	te you require to complete timent of Commerce, P.O. or Patents. P.O. Box 1450.	

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.